

Some depressions may be related to abnormal brain chemistry. Chemical and hormone changes in other parts of the body and some physical ailments can also lead to depression. Change, loss or stress can trigger depression. Losing a loved one, becoming unemployed, having money problems or moving to a new home are common stressors.

## ARE SOME PEOPLE AT HIGHER RISK?

Yes — women, children and older adults.

Until age 65, twice as many **women** as men receive treatment for depression. The most vulnerable are single mothers with small children. Maybe women are taught to handle stresses differently than men. Or possibly female hormones contribute to higher rates of depression. Or women may be more likely to seek help. Men are trained to hide their feelings or drink to numb them. (Men have higher rates of alcoholism.)

In **children**, depression can produce sadness, apathy, sleeping and eating problems. Sometimes symptoms are "masked" by behaviours like hyperactivity, delinquency and school problems or physical complaints. Severely depressed children may feel hopeless. Some think about or attempt suicide.

Many **older men and women** suffer from depressive illnesses. Poor diets, failing health, side effects from medicines, and the deaths of friends and loved ones — all can contribute. Their symptoms might be mistaken for dementia ("senility") or natural signs of aging. Many older people deny feeling depressed and blame their symptoms on physical ailments.

## IS SUICIDE COMMON IN DEPRESSED PEOPLE?

About 15 per cent of depressed people eventually die by suicide. The risk increases with age, but more and more young people are killing themselves. Some people say that anyone who talks about suicide will not try it. This is not true. Many who attempt suicide have appealed for help first by threatening to do so.

## HOW CAN WE HELP THE DEPRESSED PERSON?

Treat the depressed person as normally as possible and try to keep him or her busy and active. Depressed people are in pain. Like anyone who is ill, they need our patience, understanding and help. Try not to add to guilt feelings by blaming them for their symptoms.

Seek professional help when symptoms continue beyond a reasonable time. Even a depression that appears mild can involve a danger of suicide. Talk to the family doctor or a public health nurse if you are concerned. Mental health programs, hospitals and community agencies can help too.

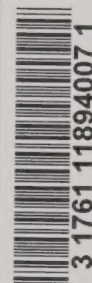
Remember, proper treatment can return a person to a full, productive life.

More detailed information is available in our booklet **Understanding Depression**.

For copies, write:  
Health Information Centre  
Ministry of Health  
8th Floor, Hepburn Block  
Toronto, Ontario M7A 1S2


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# WHAT IS DEPRESSION?

**Depressions are among the most common mental disorders — and the most treatable. An estimated 1 in 4 Canadians has a degree of depression serious enough to need treatment at some time in his or her life.**

Ministry of Health  
 Ontario



**S**adness and grief are normal reactions to life's stresses and losses. Usually time heals, and our mood improves.

Depressive illnesses are different. There is a change in the person — perhaps a loss of interest in food or sex, or waking early in the morning, or not wanting to get out of bed at all. Without treatment the symptoms may stay for months, even years.

Depression may come once, twice or many times in a person's life. Or it may be chronic, lasting. There are three major types — **major depressive disorder**, **dysthymia** and **bipolar disorder**.

Although different types may have similar symptoms, treatment might be different for each type.

People with **major depressive disorder** may be constantly sad, hopeless, irritable, and unable to feel pleasure. They may have changes in sleeping and eating habits, and difficulty concentrating or thinking clearly. They often feel guilty and unworthy of love. Some very depressed people might hear imaginary voices confirming their feelings of worthlessness. They start believing bad things about themselves and others, adding to their unhappiness. Some think about dying, or punishing themselves. Some try to kill themselves. This type of depression generally goes away in a few months, especially with proper treatment.

**Dysthymia** (or **depressive neurosis**) lasts years at a time. It can be confused with other forms of mental or physical illness that produce chronic distress.

**Bipolar depression** (once called **manic depressive illness**) involves cycles of highs and lows. At times there are symptoms of major depressive disorder. At other times, there is mental excitement (mania). There may be little need for sleep, and increased social, sexual, and physical activity. Manic people may feel capable of anything and overlook possible harm.

About 1 in 10 people with a depressive disorder has manic episodes.

## ARE TREATMENTS AVAILABLE?

Depression responds better to treatment than many other forms of mental illness. Different treatments may be used alone or together. This depends on the patient's condition, diagnosis and personal choice.

**Drug therapy** includes *antidepressant drugs* and *mood stabilizers*. Antidepressant drugs seem to correct the chemical imbalances in the brain that produce some forms of depression. Mood stabilizers can prevent the return of depression. But even when they work well, both types of drugs act slowly and can produce side effects.

**Electro-convulsive therapy (ECT)** is used to relieve severe depression. It is not known why this treatment makes patients feel and act less depressed. Side effects can include disorientation immediately after treatment, headaches and sore, stiff muscles. Some complain of memory loss in the long term. If ECT is recommended, patients should ask questions. If they have any concerns they should seek a second opinion.

**Psychotherapy (talk therapy)** can help anyone who is depressed. Treatment may include partners and other family members. Four basic types are most often used:

*Brief supportive therapy* focuses on the present and on conflicts and problems with other people. *Psychodynamic psychotherapy* emphasizes resolving inner problems and may last many months. *Behavioural therapy* teaches new ways of responding to problems. *Cognitive therapy* works on chronic problems and negative attitudes.

**Self-help groups** can also be a valuable support for depressed people, as well as their families and friends. Any mental health professional can provide the names of groups.

## WHAT CAUSES DEPRESSION?

Several factors may be at work, alone or combined.

Some depressions are at least partly inherited. Children, brothers and sisters of depressed people are more likely to suffer from depression themselves. Family environment may also play a role. Children growing up with a depressed person may learn unhealthy ways of handling stress.

